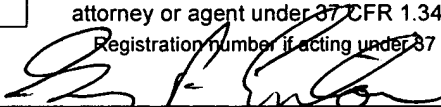




PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE <small>Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.</small>																									
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)																									
Docket Number (Optional) 564462006100																									
Application Number 10/081,872	Filed February 21, 2002																								
For ENZYMES HAVING ALPHA AMYLASE ACTIVITY AND METHODS OF USE THEREOF																									
Art Unit 1652	Examiner R. Prouty																								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																									
<table><thead><tr><th></th><th>Fee</th><th>Small Entity Fee</th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td>\$ 225.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td>\$</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td>\$</td></tr></tbody></table>			Fee	Small Entity Fee		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
	Fee	Small Entity Fee																							
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$																						
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00																						
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$																						
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$																						
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$																						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																									
<input type="checkbox"/> A check in the amount of the fee is enclosed.																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																									
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.																									
I am the <input type="checkbox"/> applicant/inventor.																									
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).																									
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,440</u>																									
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____																									
 _____ Signature																									
_____ Gregory P. Einhorn Typed or printed name																									
_____ April 5, 2005 Date																									
_____ (858) 720-5133 Telephone Number																									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																									
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																									

04/07/2005 YPOLITE1 00000052 031952 10081872

01 FC:2252

225.00 DA